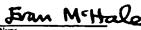
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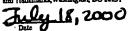
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	UTILITY	Attorney Docket No. 13020-10							
PA	TENT APPLICATION	First Inventor or Application Identifier Lincoln							
	TRANSMITTAL			Genotype 1	Determination	á			
Only for new	v nonprovisional applications under 37 C.F.R. § 1.53(b)	Ехрге	ss Mail Label No.	EL301953	995US				
See MPEP o	APPLICATION ELEMENTS chapter 600 concerning utility patent application content	ts.	ADDRESS	TO: Box Pate	t Commissioner for Patents nt Application	5			
1. X	Fee Transmittal Form (e.g., PTO/SB/17) Submit an original and a duplicate for lee processing)		5. Microt		Program (Appendix)	9			
2. X S	Specification [Total Pages 33]  Descriptive title of the Invention  Cross References to Related Applications  Statement Regarding Fed sponsored R & D  Reference to Microfiche Appendix  Background of the Invention	i	(if applicable a b c	e, all necessary) Computer Rea Paper Copy (Id Statement veril	dable Copy entical to computer copy) fying identity of above copi	es			
	Brief Summary of the Invention				PPLICATION PARTS				
-	Brief Description of the Drawings (if filed) Detailed Description Claim(s)		8. 37 C.F	.R.§3.73(b) Stat there is an assig	gnee) Attorney				
	Abstract of the Disclosure	_			cument (if applicable)				
3. X D	rawing(s) (35 U.S.C. 113) [Total Sheets 6	ال		ation Disclosure ent (IDS)/PTO-	Copies of IDS Citations	S			
4. Oath or	Declaration [Total Pages 3	رآ		nary Amendmer					
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	i DELETION OF INVENTOR(S)	ia)	13. Statem		atement filed in prior applicatus still proper and desire	cation, d			
	Signed statement attached deleting inventor(s) named in the prior applied	ng	Certifie	d Copy of Priorit	ty Document(s)				
	see 37 C.F.R. §§ 1.63(d)(2) and 1.3	13(b).	15. Other:	gn priority is clai	med)				
I PEED A SMA	ITEMS (A.): W ORDER TO BE ENTITLED TO PAY SMALL ALL ENTITY STATEMENT IS REQUIRED (27 C.F.R. 5.1.27).	ENTITY	To Ouler.	***************					
LA ONE FILE	O IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. & )	28).		***************************************					
16. HaCO	ONTINUING APPLICATION, check appropriate box	, and sup	ply the requisite infon	mation below and i	n a preliminary amendment:				
Prior ap	plication information: Examiner Jeffrey	Fred	non /	****************	9 / 088,820	- 1			
	VATION or DIVISIONAL APPS only: The entire disciple, is considered a part of the disclosure of the account.	osure of	the prior application	, from which an	oath or declaration is supplie				
reference. T	a nest percuon <u>can only</u> be relied upon when a po	ruon na	B Doen madvertently	omitted from the	on and is nereby incorporate submitted application parts	o by			
	17. CORRESPO	NDEN	CE ADDRESS			$\Box$			
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Name	David A. Kalow			_					
	Kalow & Springut LLP								
Address	488 Madison Avenue, 191	h Fl	oor			4			
City	New York State	,	New York	Zip Code	10022	_			
Country	United States Telephane		212 813 160	00 Fax	212 813 9600				
Name (P	ringType) Franklin S. Abrams		Registration No	. (Attorney/Agent)	43,457	)			
Signature	1:			Date	7/18/00	1			

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for FY 2000			Application Number		ber				
			Filing Date						
Patent fees are subject to annual revision.			First Named Inventor			Lincoln			
Small Entity payments <u>must</u> be supported by a small entity stateme otherwise large entity fees must be paid. See Forms PTOISBI09-1			Examiner Name			Fredman (from patent)			
See 37 C.F.R. §§ 1.27 and 1.28.		Group / Art Unit			165	1655 (from parent)			
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2. EXTRA CLAIM FEES	142			605	•	rissue fee (or reissue)			
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Total Claims 47 -20** = 27 × 18 = 486 Independent 2 - 3** = 0 ×	]] 144 122		-	290 130	Petitions to the	Commissione			
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109 78 209 39 ** Reissue Independent claims over original patent	Other	fae (sp	ecify) _		· · · · · · · · · · · · · · · · · · ·				
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SUBTOTAL (2) (\$) 486.00 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 870.00									
SUBMITTED BY Complete (if applicable)									
Name (PrintType) Franklin S. Abrams		Regist/ (Attorne		Vo.	43,457	Telephone	212 813	3 1600	
Signature Frankin Alman		(Attorney/Agent) 43,45				Date		00	
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